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FIRST NAMED INVENTOR

Josef Deuringer

BRINKS HOFER GILSON & LIONE P.O. BOX 10395 CHICAGO, IL 60610

FILING DATE

08/04/2006

TITLE OF INVENTION: HOUSING COMPRISING A LIQUID-TIGHT ELECTRIC BUSHING

APPLICATION NO.

10/588.556

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shown below. Tyler W. Webb (Depositor's men /Tyler W. Webb/ (Signature) May 9, 2011 Date

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11371/125(2003P17082WOUS)

CONFERMATION NO

8277

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(8) DUE	DATE DUE			
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/10/2011			
EXAMINER		ART UNIT	CLASS-SUBCLASS	Ì					
CHEN, XIAOLIANG		2835	361-752000	,					
1. Change of correspondence address or indication of "Tee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTOSB/H22) attached.  "Fee Address" indication (or "Fee Address" Indication form PTOSB/H28 indication form PTOSB/H28 or or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member aggistered attorneys or agents of Marco						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CTTY and STATE OR COUNTRY)  Siemens Aktiengesellschaft  Minchen, Germany  Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual  COUNTRY or other private group entity  Orderance									
4a. The following fee(s) are submitted:  4b.  13 Issue Fee  13 Publication Fee (No small entity discount permitted)			D Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 30-28-8565.  (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above)  1. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  1. D b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
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